

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response. . . . . . 16.00

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							
1	1						

Common Stock Filing Under (Check box(es) that apply):		
Filing Under (Check box(es) that apply):	Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
A. BASIC IDENTIFICATION DATA  O 5064089  A Good of Summer of Issuer ( check if this is an amendment and name has changed, and indicate change.)  The Fashion House, Inc.  Address of Executive Offices  (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)  Type of Business Organization  O corporation  I imited partnership, already formed  D corporation  I imited partnership, to be formed  Month  Year  Actual C Estimated  THOMSON  The factor of the information of the i	Common Stock	and the second s
A. BASIC IDENTIFICATION DATA  1. Enter the information requested about the issuer  Name of Issuer (	Filing Under (Check box(es) that apply): Rule 504 Rule 505 Z Rule 506 Section 4(6) ULC	DE COMMUNICATION DE COM
L. Enter the information requested about the issuer	Type of Filing: New Filing   Amendment	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  The Fashion House, Inc.  Address of Executive Offices (Number and Street, City, State, Zip Code)  6310 San Vicente Blvd., Suite 330, Los Angeles, CA 90048  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Type of Business Organization   limited partnership, already formed   other (please specify):    business trust   limited partnership, to be formed    Address of Executive Offices   Telephone Number (Including Area Code)    Telephone Number (Including Area Code)   Telephone Numbe	A. BASIC IDENTIFICATION DATA	05064089
The Fashion House, Inc.  Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)  6310 San Vicente Blvd., Suite 330, Los Angeles, CA 90048 323-939-3031  Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)  (if different from Executive Offices)  Brief Description of Business  Type of Business Organization   limited partnership, already formed   other (please specify):   business trust   limited partnership, to be formed  Actual or Estimated Date of Incorporation or Organization:   O 14   O 2   Actual   Estimated   THOMSON   Compared   Code   C	1. Enter the information requested about the issuer	
Address of Executive Offices (Number and Street, City, State, Zip Code)  6310 San Vicente Blvd., Suite 330, Los Angeles, CA 90048  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Brief Description of Business  Type of Business Organization    corporation   limited partnership, already formed   other (please specify):   business trust   limited partnership, to be formed    Month   Year     Actual or Estimated Date of Incorporation or Organization:   1   1   1   1   1   1   1   1   1     Actual   Estimated   Estimated	Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Brief Description of Business  Type of Business Organization  Corporation  Imited partnership, already formed business trust    Imited partnership, to be formed   Dimited partnership, to be formed	The Fashion House, Inc.	
Address of Principal Business Operations (if different from Executive Offices)    Telephone Number (Including Area Code)	Address of Executive Offices (Number and Street, City, State, Zip Code) Telepl	none Number (Including Area Code)
Comporation   Comporation   Comporation   Comporation   Component   Componen	6310 San Vicente Blvd., Suite 330, Los Angeles, CA 90048 323-	-939-3031
Type of Business Organization    Corporation	Address of Principal Business Operations (Number and Street, City, State, Zip Code) Teleptified different from Executive Offices)	shone Number (Including Area Code)
☐ corporation ☐ limited partnership, already formed ☐ other (please specify): ☐ business trust ☐ limited partnership, to be formed  Month Year  Actual or Estimated Date of Incorporation or Organization: ☐ 4 ☐ 2 ☐ Actual ☐ Estimated  THOMSON	Brief Description of Business	<del></del>
☐ corporation ☐ limited partnership, already formed ☐ other (please specify): ☐ business trust ☐ limited partnership, to be formed  Month Year  Actual or Estimated Date of Incorporation or Organization: ☐ 4 ☐ 2 ☐ Actual ☐ Estimated  THOMSON		
business trust   limited partnership, to be formed   AUG 2 6 2005    Month   Year    Actual or Estimated Date of Incorporation or Organization: 0 4 0 2 Actual Estimated   Estimated   THOMSON 2	Type of Business Organization	THUCESSEN
Actual or Estimated Date of Incorporation or Organization: 0 4 0 2 Actual Estimated  THOMSON		orty):
Actual or Estimated Date of Incorporation or Organization: 014 012 Actual Estimated		AUG 2 g 2005
Total distance of December 200 Control of the Contr		
Julisdiction of mediporation of Organization. (Enter two-letter 0.3.) I ostal Service approviation for State.		HOMSON 7
CN for Canada; FN for other foreign jurisdiction)		FINANCIAL )

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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		A. BASIC IDE	ENTIFICATION DATA		
<ul><li>Each beneficial own</li><li>Each executive offi</li></ul>	ne issuer, if the iss ner having the pow- cer and director of	uer has been organized wer to vote or dispose, or dir f corporate issuers and of	• • •		a class of equity securities of the issuer. partnership issuers; and
<ul> <li>Each general and m</li> </ul>	anaging partner of	f partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Hanna, John	individual)				
Business or Residence Addres 6310 San Vicente Blvd., S			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Wyatt, Christopher	individual)				
Business or Residence Addres			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, is	individual)				
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co	ode)		
	(Use blan	nk sheet, or copy and use	additional copies of this s	heet, as necessary)	

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No <b>⊠</b>	
2.										••••••	s 1,0	00.00	
												Yes	No
3.			permit joint		_								X
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful N/		Last name	first, if indi	vidual)									
		Residence	Address (N	umber and	i Street, Ci	ty, State, Z	(ip Code)			<del></del>			
Na	me of As	sociated Br	oker or Dea	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					·	
	(Check	"All States	s" or check	individual	States)	•••••				•••••		☐ Ail	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	vidual)				<del></del>					
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)	<del></del>					
Naı	me of As	sociated Br	oker or Dea	aler									<u> </u>
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	Name (	Last name	first, if indi	vidual)				-					
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)					<del></del>	
Nai	me of Ass	sociated Br	oker or Dea	aler							<u></u>		
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
			s" or check									AI	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	1,006,055.00	
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	\$
	Partnership Interests	S	
	Other (Specify)	S	\$
	Total	1,006,055.00	\$ 1,006,055.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	3	\$ <u>1,006,055.00</u>
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0.00
	Printing and Engraving Costs		§ 0.00
	Legal Fees		\$ 0.00
	Accounting Fees	_	\$ 0.00
	Engineering Fees	_	\$ 0.00
	Sales Commissions (specify finders' fees separately)	_	\$ 0.00
	Other Expenses (identify)	_	\$ 0.00
	Total		\$ 0.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		1,006,055.00
•	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	]\$	<u></u> \$
	Purchase of real estate	\$	<b>\$</b>
	Purchase, rental or leasing and installation of machinery and equipment	]\$	
	Construction or leasing of plant buildings and facilities	]\$	<b>\$</b>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another	<b>□</b> ¢	
	issuer pursuant to a merger)	<del>-</del>	_
	Repayment of indebtedness		_
	Working capital		
	Other (specify):	] p	□ ⊅
		]\$	<b></b> \$
	Column Totals	\$ <u>0.00</u>	\$_1,006,055.00
	Total Payments Listed (column totals added)	□ \$ <u>1,</u>	006,055.00
	D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	sion, upon writte ule 502.	le 505, the following n request of its staff,
SS	uer (Print or Type)   Signature     Signature	Date	1 _
۲r	e Fashion House, Inc.	Ceyes	10/05
	me of Signer (Print or Type)  Title of Signer (Print or Type)  CEÓ		,,
	1000		

# - ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 provisions of such rule?		•	•		Yes	No <b>⊠</b>
	S	ee Appendix, Co	olumn 5, for state r	esponse.			
2.	The undersigned issuer hereby undertakes t D (17 CFR 239.500) at such times as requ	•		of any state in w	hich this notice is:	filed a no	tice on Form
3.	The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the	state administrato	rs, upon writte	n request, informa	ition furn	ished by the
4.	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of establishments.	state in which t	his notice is filed a	nd understands			
	per has read this notification and knows the conthorized person.	ntents to be true	and has duly caused	this notice to b	e signed on its beha	alf by the	undersigned
Issuer (	Print or Type)	Signature	71111	7.	Date		//
The Fa	shion House, Inc.		TAJ2 4 4	year i	Puller	1151	105
Name ( John I	Print or Type) Hanna	Title (Print	or Type			,	

E. STATE SIGNATURE

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX										
1	Intendito non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pui	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL								THE STATE OF		
AK										
AZ									j	
AR									T Table	
CA		×	Common	3	\$1,006,055.				×	
со										
СТ										
DE									The state of the s	
DC										
FL										
GA					:					
НІ										
ID									- E	
IL									, j	
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KS										
KY									No. of the last of	
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MA										
MI	32 C C C C C C C C C C C C C C C C C C C						_			
MN		Time C Va				-				
MS		1								

## APPENDIX 3 1 2 4 Disqualification Type of security under State ULOE (if yes, attach and aggregate Intend to sell to non-accredited offering price Type of investor and explanation of amount purchased in State waiver granted) offered in state investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited Yes **Investors** Investors Yes No State No Amount Amount MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TXUT VT VAWA WV WI

APPENDIX										
1		2	3		4					
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and expla amount purchased in State (Part C-Item 2)			amount purchased in State			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR									7.73	